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7590 11/20/2003

Finnegan, Henderson, Farabow,  
 Garrett & Dunner, L.L.P.  
 1300 I Street, N.W.  
 Washington, DC 20005-3315



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(Depositor's name)

(Signature)

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/920,628	08/03/2001	Takahito Nakazawa	04329.2619	6946

**TITLE OF INVENTION:** CHIP PICKUP DEVICE AND METHOD OF MANUFACTURING SEMICONDUCTOR DEVICE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	02/20/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
ZARNEKE, DAVID A	2827	438-464000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 FINNEGAN, HENDERSON,  
 2 FARABOW, GARRETT &  
 3 DUNNER, L.L.P.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

KABUSHIKI KAISHA TOSHIBA

TOKYO, JAPAN

Please check the appropriate assignee category or categories (will not be printed on the patent);  individual  corporation or other private group entity  government

4a. The following fee(s) are enclosed:

Issue Fee  
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 Payment by credit card. Form PTO-2038 is attached.  
 The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 06-0916 (enclose an extra copy of this form).

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(Authorized Signature)	(Date)
Richard V. Burdman R.N. 31,744	1/21/04

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01/26/2004 MMKONE1 00000039 09920628

01 FC:1501	1330.00	DP
02 FC:1504	300.00	DP
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